### STATE OF INDIANA

#### DEPARTMENT OF FINANCIAL INSTITUTIONS

402 West Washington Street, Room W066 Indianapolis, IN 46204-2759 Telephone: (317) 232-3955

Fax: (317) 232-7655

#### TO PAWNBROKING LICENSEE:

Enclosed is an application for a change of OR additional location/s under your Pawnbroking license. The original copy of the application with the application fee of \$500.00 for each new location is to be returned to the Department. An application is to be completed on each location change and/or additional location.

#### FINANCIAL STATEMENT:

Review or audit level financial statements prepared by a CPA are to be included with the branch application and must show net assets of at least seventy-five thousand dollars (\$75,000) for each place of business conducted by the licensee and at least fifty thousand dollars (\$50,000) in liquid assets. Liquid assets include cash or it equivalent (any assets that are readily convertible to cash without significant loss such as treasury bills, short term marketable securities, demand deposits, and time deposits nearing maturity. It does not include accounts receivables.) In lieu of the \$50,000 liquid asset requirement, the applicant can have \$25,000 in liquid assets; \$25,000 insurance coverage on the personal property deposited as a "pledge"; and a \$25,000 bond to the State of Indiana with surety to the satisfaction of the department.

#### OTHER INFORMATION:

The Pawnbroking Act states convenience and needs of the public must exist for the operation of such business in the community where the applicant proposes to operate; consequently, it is necessary to submit a written explanation as to the needs of the public for each location. **The attached form requests the necessary information to be provided.** The City police and the county Sheriff in the community of the proposed location are to be notified of the licensee's intention to establish a pawnbroking business in that community. The applicant shall also inform the Department in writing on the application the name, address, and telephone number of each official that was contacted.

If you desire further information concerning specific branching questions, please contact this office.

#### NON-DEPOSITORY DIVISION



DATE REC	
LIC #	DFIID #
INVOICE #	CHECK #
AMT. PD	BAL. DUE

## **APPLICATION FOR NEW PAWNBROKING LOCATION**

#### ATTACH LICENSE APPLICATION FEE CHECK HERE

PAWNBROKING LICENSE INFORMATION						
Name of Pawnbroking Business						
Address ( Number and Street)						
City, State, Zip Code T	elephone Number	Fax Number				
NEW LOCATION INFOR	RMATION					
Address ( Number and Street)						
City, State, Zip Code T	elephone Number	Fax Number				
ACKNOWLEDGMENT						
The applicant executed this application on and acknowledges that all statements made herein and supporting schedules, to the best of my/our knowledge and belief, are true and is a true and complete statement in accordance with the law.						
IF A CORPORATION, PRESIDENT AND ONE OFFICER MUST SIGN; PARTNERSHIP, ALL PARTNERS MUST SIGN; OR OWNER MUST SIGN.						
Ву:	Title					
Ву:	Title					
Ву:	Title					

	GENERAL QUESTIONS & ADDITIONAL INFORMATION REQUESTED			
1.	Do you intend to carry on or engage in any other business in addition to Pawnbroking business at this new location. Yes □ No □ If Yes, describe type of business:			
2.	Number of Pawnbroking locations now operating under your pawnbroking license			
3.	Do you have a net worth of seventy-five thousand dollars (\$75,000) for each place of business conducted, including the new location? Yes $\square$ No $\square$ You also must have \$50,000 in liquid assets or in lieu of the \$50,000 liquid asset requirement, the applicant can have \$25,000 in liquid assets; \$25,000 insurance coverage on the personal property deposited as a "pledge"; and a \$25,000 bond to the State of Indiana with surety to the satisfaction of the department			
lea	TACH CPA prepared REVIEWED OR AUDITED FINANCIAL STATEMENTS indicating at st \$75,000.00 net worth for each location operating a pawnbroking business and uid assets of at least \$50,000 or alternate financial requirements given above.			
The Pawnbroking statute states convenience and needs of the public must exist for the operation of such business in the community where the licensee proposes to operate; consequently, it is necessary to submit a written explanation as to the needs of the public for the new location. The attached from requests the necessary information to be provided. The City Police and the County Sheriff in the community of the proposed location are to be notified of the applicant's intention to establish a pawnbroking business in that community. List the name, address, and telephone number of each official that was contacted below:				
Nar	ne			
Add	Iress			
City	, Zip Code Telephone Number			
Nar	me			
Add	dress			
City	, Zip Code Telephone Number			

# IC 28-7-5-8 REQUIRES THAT THE CONVENIENCE AND NEEDS OF THE PUBLIC EXIST IN THE COMMUNITY WHEREIN AN APPLICANT PROPOSES TO OPERATE

The applicant will furnish facts and figures which establish the needs of the public in the market area for the proposed pawnshop. THE APPLICANT WILL PROVIDE THE FOLLOWING INFORMATION:

	MATION:
1.	A copy of your proposed business plan. If this plan includes items that are separately required on this form under questions 2 through 10, you may refer to your business plan in those questions.
2.	A defined area which the applicant believes to be the primary market of the pawnshop.
3.	What is the population of the market area? Give any other demographic information or statistics.
4.	What is the percent of increase in the population in this area in the last five years?
5.	State the projected increase in population in this area in the next five years.
6.	Who are the major employers which exist in the market area?
7.	What projected growth will there be through new industry for the next five years?
8.	Are there any existing banks or branches of banks, savings banks, savings and loan associations, credit unions, finance companies or other pawnbrokers which have an office or offices in the market area? If so, please list them by name and address (use a separate sheet if necessary).
9.	What is the average family income of the proposed market area?
10.	Are there any schools, churches or other civic establishments in the proposed are? Please list them and state how far they are from the proposed location of the pawnshop; space is provided on the back of this form.
usiness	Name:

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Proposed Location:	

Item 10. List:							
THE LOCAL CHAMBER INFORMATION.	OF COMMERCE	MAY BE	A RESOURCE	FOR	SOME	OF	THIS
Prepared by:							
			Type or print name				